

DOOR COUNTY APPLICATION FOR EMPLOYMENT

Door County is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, sexual preference, age, marital status, pregnancy, disability, or any other legally protected status.

MAIL APPLICATION MATERIALS TO:

Door County Human Resources Dept

421 Nebraska Street Sturgeon Bay, WI 54235

Phone: (920) 746-2305

Fax:

(920) 746-2538 e-mail: hr@co.door.wi.us

Door County reserves the right to test all applicants for jobrelated skills. For certain positions, a pre-employment physical examination and drug testing may be required.

Position Applied For:

Last Name:

Clerk Typist I

Deadline: Wednesday, June 9, 2010 - 4:30 p.m.

Date Available:

Middle Name:

Thank you for your interest in employment with Door County. Please read the following instructions carefully:

- This application is to be filled out by the applicant only. If you are physically unable to complete this form, or need other assistance in the hiring process, reasonable accommodations may be requested.
- Incomplete or illegible applications will not be considered. Résumés will be accepted as a supplement to the application form, but will not substitute for it.
- If more space is needed, please indicate this on the application form and attach the additional paper to the application.

Street Address:				City:			State:		ZIP:			
	Home Phone: Work Pho				May we contac	t you at wor	k?	What I	Hours?			
Yes No												
	E-Mail Address: Type of Employment Acceptable: (check all that apply											
]	Full-Time	e Part-Time	Seasonal	Casual	Intern	LTE	3			
	Are you at least 18 years of age? (Employment may be subject to verification that you meet state and federal minimum age requirements. Employees under 18 shall have a work permit.)								Yes	No		
	Are you a United States citizen, or do you have papers from the U.S. government permitting you to work? (Verification will be required at the time of employment.)							Yes	No			
	Are you able to perform all of the duties listed in the position description, with or without reasonable accommodation?							Yes	No			
	Have you ever been convicted of a felony? (If the answer is "yes", please explain at the end of this application form. A "yes" answer does not necessarily disqualify an applicant.)							Yes	No			
			Work	(His	TORY – PAR	τА						
A "yes" answer to any of the following questions does not necessarily disqualify an applicant from the selection process. If you answer "yes" to any of the following questions, please provide an explanation at the end of this application form.												
1.	Have you ever been suspende	ed, terminated,	dischar	ged or res	signed to avoid bei	ng discharge	d?		Yes	No		
2.	Have you ever been disciplined for attendance problems in your current or previous employment?						Yes	No				
3.	Are there any gaps in employment in excess of thirty (30) days?					Yes	No					
4. Have you ever been employed by Door County?						Yes	No					

PERSONAL INFORMATION

Door County

Department:

First Name:

Planning Department

Hic		nool:	1 - 3	No		
& Traini	ing Beyond High Schates Major Field of	nool:	Yes	No		
& Traini	ing Beyond High Sch	nool:	Deg	gree		
Da	Major Field of		Deg	gree		
Da	Major Field of		1 - 3			
Da	Major Field of		1 - 3			
om:	10:	Name & Location of Institution: Dates Major Field of Study: GPA				
			Yez			
				-		
the analysis of the same and the same and	managements to the contract of the second of the contract of the second	wel and/or driver's lie	censing is requ complete	iired, j this se		
			Yes	No		
DI#			Yes	No		
	ercial Driver's license (CDL)	?		N.		
ISIII COIIIII	Cross Direct 3 noction (CDB).		Yes	No		
ehicle? (\$1)	nce coverage meeting the Cour 00,000 per person; \$300,000 p ombined single limit)	nty's minimum per accident bodily	Yes	No		
e (5) years:						
FESSIO	NAL REFERENCES ribe your work abilities, qualif	ications, skills, and/or	r educational			
FESSIO	ribe your work abilities, qualif mificant others.					
FESSIO	ribe your work abilities, qualif		r educational			
FESSIO	ribe your work abilities, qualif mificant others.)		
	DL# nsin Comm ain, insurar	DRIVER'S LICENSE for which you are applying. If business troe DL# nsin Commercial Driver's license (CDL) ain, insurance coverage meeting the Cour chicle? (\$100,000 per person; \$300,000 per	DRIVER'S LICENSE for which you are applying. If business travel and/or driver's license (CDL)? DL# ain, insurance coverage meeting the County's minimum ehicle? (\$100,000 per person; \$300,000 per accident bodily	DRIVER'S LICENSE for which you are applying. If business travel and/or driver's licensing is required to complete Yes DL# Yes ain, insurance coverage meeting the County's minimum ehicle? (\$100,000 per person; \$300,000 per accident bodily		

WORK HISTORY - PART B

Please complete this section in its entirety. Give a complete record of any employment, self-employment, military service or volunteer experience you have had in the past 10 years. Please include positions beyond the 10 year period if they are related to the position for which you are applying. Start at the top with your present or most recent job. Indicate any change in job title under the same employer as a separate position. You may attach your resume as a supplement to the information you provide in the application. Please note that it is the policy of Door County to contact an applicant's current employer only after that applicant has been deemed a finalist for a position.

Position Title:

Type of Business:

Employer Name:	;	Position Title:			Type of Business:			
Address and phone of Business (Street, City, ZIP, telephone & fax #	Reason for Lea	Name, Title & Phone of Supervisor:						
Employment Dates:	Start Salary:	7 11 61	II		May we conta	ct, prior to an offer		
From: To:	Ending Salary:	Hours per W	reek:	of employment? Yes No				
Description of Duties:								
Employer Name:	-	Position Titl	e:	Type of Business:				
Address and phone of Business (Street, City, ZIP, telephone & fax#)	Reason for Lea	ving:	Na	me, Title & Phon	e of Supervisor:		
Employment Dates:	Start Salary:	Ending Salary:	Hours per V	Week: Is this employer still in business?				
From: To:					No			
Description of Duties:								
Employer Name:		Position Titl	e:	Type of Business:				
Address and phone of Business (Street, City, ZIP, telephone & fax#		Reason for Lea	Name, Title & Phone of Supervisor:					
Employment Dates: From: To:	Start Salary:	Ending Salary:	Hours per Week:		k: Is this employer still in business?			
From: To:					Yes No			
Description of Duties:	1							

(For additional employers, please use a separate piece of paper or make a copy of this page)

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EXPLANATION(S) /	SUMMART II	VFORMATION			
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•		•			
	-				
REFERRAL SOURCE (PLEASE I	PROVIDE DET	AIL WHEN POSSIBLE)			
Newspaper:	Employee:				
Employment Agency:	Web Site:				
Bulletin Board: Professional Journal:					
Walk-in:	Job Service:				
Other:					
	*				
In order for your application to l	ne considere	d, you must complete the			
Employment Application	Affidavit / In	formation Release.			
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DOOR COUNTY PERSO	NNEI DEPAR	TMENT USE ONLY			
BOOK COUNTY LESS	MILEBELAN	Date Received:			

EMPLOYMENT APPLICATION AFFIDAVIT / INFORMATION RELEASE

I hereby certify that all statements made on or in connection with this application are true, complete and correct to the best of my knowledge and belief. I understand and agree that any misstatements, false information, or omissions of material fact herein subjects me to disqualification or dismissal. I further understand that my classification as a regular employee depends upon successfully performing work assigned to me during a probationary period, where applicable. I also understand that regular attendance is required of me as a condition of continued employment.

I understand and agree that all information furnished in this application may be verified by Door County. I also understand that any offer of employment is conditional subject to a satisfactory check of references and satisfactory results of a background check, drug screen when required, and any other required examinations.

I understand that Door County may conduct a check on my background to verify the information I have furnished in my application for employment, which may include, but not be limited to, information from previous employers, references, school records, driving records, and any criminal records.

I hereby voluntarily and knowingly authorize and request any current or former employer, educational institution, law enforcement agency, or other persons or organizations having personal knowledge about me to furnish Door County with any and all information in their possession regarding me, in connection with an application for or retention of employment. Further, I hereby release from liability or responsibility all persons, companies and corporations supplying such information. Copies of this document will be considered as valid as an original thereof.

Name (Printed or Typed):	Signature:	Date:
		,
OPEN RECOR	RDS DISCLOSURE (OPTIONAL	
This section is optional: Under section 19.36 must be open to public inspection. The staname revealed prior to being a "final candidate"	atute also provides that if an app	licant does not want his/her
Accordingly, I hereby request that my emploremain confidential to the extent allowed by		references and documents
Name (Printed or Typed):	Signature:	Date:

THANK YOU FOR COMPLETING THIS APPLICATION AND FOR YOUR INTEREST IN EMPLOYMENT WITH DOOR COUNTY.

DOOR COUNTY BACKGROUND CHECK & EQUAL EMPLOYMENT OPPORTUNITY INFORMATION DISCLOSURE FORM

Door County is an Equal Opportunity Employer. We consider applicants for all positions without regard to race, color, religion, sex, national origin, sexual preference, age, marital status, pregnancy, disability, or any other legally protected status.

The following information is needed for the following purposes:

- To complete various government reports and implement equal employment opportunity and affirmative actions programs.
- To monitor and prevent discrimination on the basis of race, color, religion, sex, national origin, sexual preference, age, marital status, pregnancy, disability, or any other legally protected status.
- To facilitate and conduct the necessary background checks for pre-employment screening. These may include, but are not limited to the following: caregiver background checks; criminal records checks; driver's licensing checks; credential and educational verifications; and other necessary background investigations.

The information furnished on this form will not and legally cannot be used adversely against an applicant for employment, except that age, sex, and physical or mental ability may be considered when relevant to the position for which you are applying. This document will not be kept with the employment application, and will not be shared with those individuals involved in the interview process. It shall be maintained as a confidential record of the Personnel Department.

Please Supp	ly The Foll	lowing Inforn	nation		100 de 10	
Last Name:	First		Middle Name			
Position Applied For:	Date o	Are you 40 years of age or older Yes No				
Maiden Name (If Applicable):	Social Secu		Sex:			
			Male	/	Female	
. R	Race: (Please C	Check One)				
American Indian/Native American (including Natives)	g Alaskan	African American or African origin				
Asian		Hispanic/Lat	tino			
White not of Hispanic origin		Native Hawaiian or Pacific Islander				
Other						
	Disabilit	y:				
The Americans with Disabilities Act (ADA) defines a impairment that substantially limits one or more majo manual tasks, walking, caring for oneself, learning, the regarded as having such an impairment." Based on this	or life activities [ninking or worki	[such as hearing, see ing], has a record of	eing, speaking, br f such an impairm	eathing, pe ent, or who	erforming	

The completion of the "Door County Background Check & Equal Employment Opportunity Information Disclosure Form" is voluntary, and there will be no adverse consequences for not completing this form.